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target value achievement in Swiss general practice**

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Author reply to technical comment on: Rachamin et al. Statin treatment and LDL target value achievement in Swiss general practice

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This is a response to the letter by Romanens et al. [1], which commented on our paper investigating statin treatment and low-density lipoprotein target value achievement in Swiss general practice [2]. Romanens et al. raise important points, which we are glad to reply to as follows.

First, Romanens et al. point out that new European Society of Cardiology (ESC) / European Atherosclerosis Society (EAS) dyslipidaemia guidelines were published in 2019 [3] and their impact on treatment recommendations would be interesting. We very much agree with this assessment and dedicated a separate study to this research question [4]. In short, we found that even though the new guidelines reduced the cardiovascular risk category from “very high” to “high” in many patients, it still intensified treatment recommendations for 71.4% of patients by decreasing the low-density lipoprotein target values.

Second, Romanens et al. highlight that our study did not consider Systematic Coronary Risk Evaluation (SCORE) values for risk classification. Although it would have been feasible to include this in our study, it would have been against the recommendation of the 2016 ESC/EAS guidelines [5], which explicitly state that SCORE values are only valid for treatment-naïve patients, which our study population was not. Accordingly, we were quite surprised by speculations raised by Romanens et al. that the absence of the SCORE in our study is due to influence exerted by the Swiss Medical Board (SMB). Our above-mentioned further study on the impact of the new guidelines, which was also funded by the SMB, considered operationalised SCORE values and gives corresponding insights to the interested readership. In addition, we are currently conducting a study precisely dedicated to treatment-naïve patients

with assessed cardiovascular risk and expect results to be published next year.

Romanens et al. see the SMB and other media reports as a major cause of the underuse of statins in Switzerland and encourage us to discuss this topic further. However, determinants of public opinion are beyond the scope of our research article. We are, however, thankful for Romanens et al. engaging in a discussion about these points and contributing their own perspective to public opinion.

Disclosure statement

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